24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Action		
		C C00524181
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee		Date of Public Distribution/Dissemination
Thomas Graphics Inc		06 06 2016
Mailing Address 9501 NIH 35		Amount
City State	Zip Code	19435.00
Austin TX	78753-3804	Transaction ID : EBC1DD5CD6F4C4C3C91I Date of Disbursement or Obligation
Purpose of Expenditure IE-Glenn-Postage	Category/ Type	M 06
Name of Federal Candidate	Support Of	ffice Sought: House District:
Darryl Glenn	Oppose	President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		sbursement For:
Full Name of Payee Jamestown Associates		Date of Public Distribution/Dissemination
Mailing Address 5 Manleton Rd Ste 300		06 06 2016
Mailing Address 5 Mapleton Rd Ste 300		Amount
City State	Zip Code	18010.00
Princeton NJ	08540-9646	Transaction ID : EA4E6D0A9F2324E1985A Date of Disbursement or Obligation
Purpose of Expenditure IE-Glenn-Direct Mail Production	Category/ Type	06 / D D / Y Y Y Y Y Y Y
Name of Federal Candidate	X Support O	ffice Sought: House District:
Darryl Glenn	Oppose	President X Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		isbursement For:
	<u> </u>	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	37445.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	37445.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	ically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		